

APR 22 1953

Artist ROBERT J. BUCHOLZ (Please print plainly)

Telephone No. \_\_\_\_\_ Address 3347 East 145th St. 20  
Zone No. \_\_\_\_\_

**Please Enclose Registration Fee of \$2.00 (Check or Money Order) With Entry Blank**

[illegible]

Entry blanks must be filled out and returned to the Museum on or before April 7, those postmarked later than April 7 will not be accepted.

Entries must be delivered at the Museum between 9 A.M. and 5 P.M. from April 11 to April 18 (except Sunday).

LIST OF CLASSES ON BACK